## APPENDIX I MEETINGS OF PANEL ON HEALTH SERVICES AND MOTION DEBATE OF LEGISLATIVE COUNCIL RELATED TO HEALTHCARE REFORM PUBLIC CONSULTATION

Date	Meeting/Motion Debate
13 March 2008	Special Meeting, Panel on Health Services  - Briefing by the Secretary for Food and Health on Healthcare Reform Consultation  Document
19 March 2008	Special Meeting, Panel on Health Services - Further discussion on the Healthcare Reform Consultation Document
10 May 2008	Special Meeting, Panel on Health Services  - Healthcare Reform Consultation Document  • Agenda and submissions of deputations  • Notes of meeting
17 May 2008	Special Meeting, Panel on Health Services  - Healthcare Reform Consultation Document  • Agenda and submissions of deputations  • Notes of meeting
28 May 2008	Legislative Council Meeting  - Motion on "Immediately improving the healthcare services in Hong Kong" (see overleaf)
24 June 2008	Special Meeting, Panel on Health Services  - Consultation on Healthcare Reform  • Agenda and submissions of deputations  • Notes of meeting
7 July 2008	Special Meeting, Panel on Health Services - Consultation on Healthcare Reform

The links to the notes of the special meetings, the submissions of the deputations and the motion debate are available on the Healthcare Reform website (http://www.beStrong.gov.hk).

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## Motion on "Immediately improving the healthcare services in Hong Kong" carried in the Legislative Council on 28 May 2008

"That, the Consultation Document on Health Care Reform has given rise to extensive discussion in the community since its publication, and presently there is public consensus hoping that the Government would strengthen the role of primary health care services, engage in closer public-private partnership (PPP) in health care, improve the current public health care services, etc. to resolve the existing problems in health care services, thus this Council urges the Government to implement a series of measures and immediately allocate funding to improve Hong Kong's health care services; such measures must include:

- (a) carrying out institutional reform to strengthen the role of primary health care in the overall health care services, and conducting detailed study on the institution of family doctor;
- (b) the Authorities substantially augmenting the provision of resources to improve existing services, increasing the use of new psychiatric drugs and thoroughly considering the views of stakeholders in formulating long-term psychiatric treatment and rehabilitation policy, in view of the persistent lack of resources and long-term service planning for psychiatric treatment, rehabilitation and support services;
- (c) increasing the funding for the Hospital Authority (HA) to address the plight of persistent shortage of resources suffered by some hospital clusters or district hospitals, reducing the working hours of HA doctors, improving the promotion prospects of doctors and the situation of unequal pay for the same work, in order to retain experienced and middle-ranking doctors and health care workers as well as boost staff morale;
- (d) proactively allocating land for the construction of new private hospitals and assisting existing private hospitals in their extension, so as to increase the provision of beds in private hospitals;
- (e) increasing training resources and opportunities for specialists to enable various medical specialties to have sufficient room for development, thereby providing patients with the most suitable services;
- (f) re-opening nursing schools and increasing the number of places for nursing degree programmes to boost nursing manpower;
- (g) through promoting various PPP projects on health care services to improve the imbalance between public and private health care services which has existed for a long time, and supporting PPP in dental services;
- (h) providing additional resources for HA or patients to purchase drugs, such as drugs for curing cancer, and immediately reviewing the Drug Formulary to avoid patients being denied effective drugs with little side effect due to financial difficulties and to reduce misunderstanding between doctors and patients;
- through purchasing services from community doctors or increasing the manpower of general outpatient clinics to reduce the number of cases in each consultation session attended by outpatient doctors and shorten patients' waiting time, thereby enhancing service quality;
- strengthening regulation of private medical insurance and encouraging the industry to provide medical insurance which is in line with public interest, such as insurance which does not discriminate against mental or chronic illness, and providing tax incentive to encourage the public to purchase medical insurance;
- (k) increasing the value of elderly health care vouchers to at least \$1,000 a year, lowering the eligibility age for such vouchers to 65 and providing low-income families with such vouchers;
- (l) enhancing oral care education;
- (m) providing dental care vouchers for young children, secondary students, low-income families and the elderly, so as to protect the oral health of the public;
- (n) strengthening the role of paramedical professionals in the health care system, and promoting their links and cross-referral of patients with Western and Chinese medicine practitioners, so as to provide Hong Kong people with more efficient and better health care services through a team approach;
- (o) stepping up disease prevention work, such as expeditiously updating the vaccination programme and subsidizing people to receive preventive care services; and
- (p) using Chinese medicine more extensively to further enhance the quality of health care services."

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